(Change in Company's premium or ra	te level produced by rate revision effec	tive 9-1-08
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	49,761	-0.6%
10.	Extended Coverage	57,111	-0.6%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
No		territories) or certain classes? If so, spe	
		s rates of an advisory organization, spe	ecify organization):
Rev	ising our Premier Plus rates.		
	djusted to reflect all prior rate chang		
	nange in Company's premium level		
re	sult from application of new rates.	OF INSURANCE FILLINOIS/IDEPR	
	TION	OF INSUIDEPR	
	DIVISION		
			All America Ins. Co.
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	N 2.4 2008 -	Name of Company
	1 70	N 2 4 2008	1
	1	_{NOI} S	
	\ 	IGFIELD. ILLINOIS	
	\ SPHII		Mrs. Petrise Meyer
			Sr Rates and Forms Analyst,
			Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produc	ced by rate revision effective	01/01/2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
8. Boiler and Machinery		
9. Fire	\$102,210	-8.8%
12. Homeowners 13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Line of modernoe		
Does filing only apply to certain territory (territories)	or certain classes? If so, specify:	No
Brief description of filing. (If filing follows rates of an Group filing to revise company deviations.	advisory organization, specify orga	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will re-	sult from application of new rates.	
	American Guerentee	and Liability Insurance Company
		ne of Company
	Pauly S. Bay	Ittl - Business analys!

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ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	01/01/2009
	(1) <u>Coverage</u>	(2) Annual Premium Volume (illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$751,331	-23.1%
	Extended Coverage		
	Inland Marine	-	
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
		erritories) or certain classes? If so, specify: ates of an advisory organization, specify organ	No No
		ates of all advisory organization, specify organi	
*Ad	justed to reflect all prior rate changes. hange in Company's premium level wh	ich will result from application of new rates. American Zuric	ch Insurance Company
			of Company ,
		Jaula S. Bou	
		Off	cial - Title

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	Change in Company's premium or	rate level produced by rate revision effective	June 17,2008 New/ August 15, 2008 Renewals
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.			
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft	·	
5.	Glass		
6.	Fidelity	<u> </u>	
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$111,123	-6.6%
10.	Extended Coverage	\$45,553	-6.6%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		0.004
15.	Other Dwelling Liability Line of Insurance	\$10,074	0.0%
Does na	filing only apply to certain territory	(territories) or certain classes? If so, specify:	
-			
Wit	f description of filing. (If filing follo thdrawing ISO's loss costs filing #DP -2003-RLA1	ws rates of an advisory organization, specify of 2007-RLA1 & DP-2005 RLA1 and reverting	organization): back to ISO's loss costs filing #

- * Adjusted to reflect all prior rate changes.* Change in Company's premium level which will result from application of new rates.

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SPRINGFIELD, ILLINOIS

Central Mutual Insurance Company Name of Company

(Mrs.) Petrise Meyer Sr Rates & Forms Analyst Official - Title

H29219D

(Change in Company's premium or ra	te level produced by rate revision effective	9-1-08
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger Commercial		
2.	Automobile Physical Damage	-	
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	247,728	-0.6%
10.	Extended Coverage	181,560	-0.6%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	filing only apply to certain territory (territories) or certain classes? If so, specify:	
		-	
Brief.	description of filing (If filing follow	s rates of an advisory organization, specify o	organization):
	ising our Premier Plus rates.	s rates of an advisory organization, specify	
VEA	ising our Tremier Flus lates.		

- * Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will result from application of new rates.



Central Mutual Ins Co. Name of Company

Mrs. Petrise Meyer Sr Rates and Forms Analyst, Official - Title

H29219D

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in C	Company's premium or rate level p	produced by rate revision effective	01/01/2009
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
2. Automo Priv 3. Liability	Other Than Auto		
5. Glass6. Fidelity7. Surety	y and Theft nd Machinery		
9. Fire 10. Extende 11. Inland M 12. Homeon	ed Coverage Marine wners ercial Multi-Peril	\$222,236	-3.4%
Brief descrip	ation of filing. (If filing follows rates	ories) or certain classes? If so, specify: of an advisory organization, specify orga	No anization);
*Adjusted to	reflect all prior rate changes.	Nar	n Casualty & Surety Company ne of Company
		Paula J. Bay	tell-Business and



Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate l	level produced by rate revision effective	01/01/2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
 Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass 		
6. Fidelity 7. Surety 8. Boiler and Machinery		
9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other	\$215,072 (territories) or certain classes? If so, specify:	2.6% No
Brief description of filing. (If filing follows Group filing to revise company deviations.	rates of an advisory organization, specify organi	
*Adjusted to reflect all prior rate changes **Change in Company's premium level v	s. which will result from application of new rates.	
		Marine Insurance Co.
	Paula S. Dart	IV - Dusiness avalys



Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or ra	te level produced by rate revision effective	01/01/2009
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
COVOTAGO	Volama (Million)	
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commerc	:ial	
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$364,288	13.6%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other	` `	
Line of insurance		
	ory (territories) or certain classes? If so, specify:	No
Brief description of filing. (If filing follo Group filing to revise company deviations.	ws rates of an advisory organization, specify orgar	
*Adjusted to reflect all prior rate chan	ges.	
	el which will result from application of new rates.	
	Fidelity & Depo	sit Company of Maryland
	Name	e of Company
	Paulo S. Bou	tell-Business avalge
	Off	ficial Title



Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
Coverage	· Volume (Illinois) *	Change (+or-) **
Automobile Liability Private	,	
Passenger		
Commercial		
Automobile Physical Dama	g	•
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery	A service of the serv	Control of the second of the second
Fire	\$760,492	- 25%
Extended Coverage	The state of the s	
Inland Marine		
Homeowners		The state of the s
Commercial Multi-Peril		
Crop Hail		<u> </u>
Other		
Life of Insurance		·
Does filing only apply to co	ertain territory (territories) or o	certain
Classes? If so,	, , , , , , , , , , , , , , , , , , , 	
· ·	lies to all territories	
Brief description of filing	(If filing follows rates of an ac	lvisory
•	(•
Organization, specify		
Organization, specify organization):	Base Rate Decrease	

FUIII LIKE*S	Form	(RF-3
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	Change in Company's premium revision effective 08/01/2008	n or rate level produced by rate	
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -) **
1.	Automobile Liability		
	Private Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
_	Commercial		
3.	Liability other than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7. 8.	Surety	* . 1	
9.	Boiler and Machinery Fire	387,710	5.2%
10.	Extended Coverage	301,710	0.270
11.	Inland Marine	<u>, , , , , , , , , , , , , , , , , , , </u>	
12.	Homeowners		
13.	Commercial Multi-Peril*		
14.			
15.	Other		
10.	Outo.		

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Dwelling Fire Base Rate revision

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Does filing only apply to certain territory (territories) or certain

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classes? If so, specify: No

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SPRINGFIELD, ILLINOIS

Trustgard Insurance Company
Name of Company

Brett C. Helf, Product Manager
Official - Title

Jerff GRAN - 125709682

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate I	level produced by rate revision effective	01/01/2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$3,391,896	2.6%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Perli		
14. Crop Hail		
15. Other		
Line of Insurance		
Brief description of filing. (If filing follows	(territories) or certain classes? If so, specify:	
Group ming to revise company deviations.		
*Adjusted to reflect all prior rate change: **Change in Company's premium level to	which will result from application of new rates.	can Insurance Company
		ne of Company
	Joula S. Bo	tel - Business and
		fficial - Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR

JUN X 2 2008

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective			01/01/2009	
	(1)	(2) Annual Premium	(3) Percent	
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**	
1. Aı	utomobile Liability Private			
	Passenger Commercial			
. Aı	utomobile Physical Damage			
	Private Passenger Commercial			
	ability Other Than Auto			
	urglary and Theft lass			
	delity			
	urety			
	oiler and Machinery			
Fi		\$64,561	11.9%	
	tended Coverage			
	land Marine			
	omeowners ommercial Multi-Peril			
	rop Hail			
	ther			
	Line of Insurance			
oes f	iling only apply to certain territory (to	erritories) or certain classes? If so, specify:	No	
		ates of an advisory organization, specify orga		
	ted to reflect all prior rate changes.	ich will result from application of new rates.		
			a turn t	
		Zurich American Insurance Company of Illinois Name of Company		
			tell - Business avaly	
			fficial - Title	

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